

# Health Data Committee Meeting

May 11, 2000

Room 125-Cannon Health Building

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Those in attendance: (Committee Members) Clark Hinckley, Andrew Bowler, Lori Reichard, Robert Huefner, Greg Poulsen, Keith Peterson, Sandy Peck, Orrin Colby and Penny Brooke. (Staff Members) Robert Rolfs, Luis Paita, Kevin Lertwachara, Chung-Won Lee, Bill Stinner, Gulzar Shaw, John Morgan and Janet Scarlet. (Guests) Michelle McOmber (UHA), Rhoda Nicholes (DOH) and Joan Ware (DOH).

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Meeting started at 3:45 with Orrin Colby Presiding.

Minutes from last meeting were approved unanimously.

Introduction of the new members:

**Dr. Robert Huefner** (Public Health) is the Director of the Matheson Center for Health Care Studies at the University. He has been involved since the creation of the Committee. He was meeting as the addhawk group to develop a data set to evaluate what was going on in health care. He graduated from U of U and did graduate work from MIT and Harvard and Doctorate in Finance.

**Greg Poulsen** (Hospital) is a Health Care Planner for IHC. He has worked for IHC for over 18 years and spend a little bit of time with the Mackenzie Co.. His primary focus at IHC has been on teaching, planning and research areas, using data from this group for as long as it has been available.

**Clark Hinckley** (Business) is the Human Resources Director for Zions Bank Corp. Worked for them for about 15 years. Part of his interest is with trying to resolve health care issues. So being on this committee is the first step in resolving some of those issues.

**Andrew Bowler** (Business) Runs a consulting firm HR Advantages. Health Care is a major issue for his business, with their small work force and then they also advise larger companies on their health care issues. The major issue is cost and availability. He provides a small and large business perspective and is anxious to see what he can bring to those roles.

Introductions of the other members of the committee:

**Lori Reichard**- (Consumer Advocate) works at Snowbird and LaFavor Envelope.

**Dr. Keith Peterson** -( Insurance) He is with Blue Cross. He has been there 5 years. He was in private practice at the Salt Lake Clinic for about 25 years.

**Sandy Peck**-(Consumer Advocate) She is with the League of Women Voters, which has done quite a bit on study and advocacy on health care. Right now the Utah league has a grant from the national league to study and get the community involved in the problem of the uninsured.

**Orrin Colby** - (Small Business) Chair, Works with Wasatch Crest Insurance Co. 100 employees in the company. He is the Chair of this committee.

**Penny Brooke** - (Nursing)Vice Chair, She is Professor and Coordinator of Service Learning, at the University of Utah (college of nursing). She is an APRN and also an Attorney. She has found an interesting way to mold together multiple disciplines into one unit.

**Notice of formal elections.** Members need to submit the names for nominations, to Orrin for Chair and Vice Chair, early enough so he can talk to them and make sure they are willing and then have things ready for a vote at our next meeting. We need 14 days of notice according to our Bi-Laws.

**Luis Paita** - we have had major turnovers in our staff in the past 2 years and have just hired John Morgan to replace John Kane as Information Analyst Supervisor, and Greg Stoddard as our new Applications Programmer Analyst. Kevin Lertwachara just recently resigned to attend a Doctorate program at the University of Toronto. We have hired a replacement for Kevin. It is Dr. William Stinner who has been a professor at Utah State University. He will start as soon as Kevin leaves.

**Bill Stinner** - I have been with the Population Research Laboratory at USU for the past 25 years. And I am also involved with the International Sociology Association. I got my masters and PhD from Penn State University. I worked on analysis of the 1991 and 1996 Utah Health Status Survey.

**John Morgan** - Currently we are on the final edits of the inpatient data base and the ER database and the Ambulatory data base for 1998. The 1999 inpatient database will be available about September, but the ER and Ambulatory won't be available until about December.

**Luis Paita** - I was told this morning that the new ER Report is in print, but we were unable to get them for this meeting. (1997 Data) We do have the new Medicaid Satisfaction Survey and HEDIS, and also the new update on the consumer guide on the hospital utilization data bases. We are working on a report focused on cardiovascular conditions from the hospital data, and Gulzar will tell us about that.

**Gulzar Shah** - Dr. Rolfs did an outline for the analysis on the Cardiovascular Report. The first page is a quick description of all the tables. It tells you what measures are calculated. Also it tells you what conditions or procedures are studied in this table. For instance we computed numbers of diagnosis by age groups from 15- 75+. Etc.

**Robert Rolfs** - We wanted to look a little bit more intensively at areas of health care. Partly because it has been suggested by the committee and partly because it has a pretty big impact on costs. With these graphs we can look at condition specific utilization & cost. Other states have done this too, whether the Surgeons and Cardiologists look at this and that is debatable. But states that have done this have seen decreases in their mortality rates. So it is clearly something that we would want to explore doing, looking at the severity of the patient, high mortality rate and so forth. Some of the other graphs are by health districts and by where the people are living and not where the procedure was done. The next one is what procedures were done when the person was in the hospital. These graphs are to generate questions rather than answers. Cache and Rich Co. are the healthiest counties in the nation. Further Mike Stapley could examine whether they are getting better care or just getting healthier.

**Greg Poulsen** - The report from New York was interesting to me was that when they started to report by clinician the mortality went down. Everyone thought it was great except the thoracic surgeons, who argued that people which were compromised and at high risk, simply didn't get surgery. It opens up really valid questions as to whether they really should have gotten surgery, but the surgeons were backing away from that because of the study. So we need to look hard at the results.

**Clark Hinckley** - Is there evidence from the data that releasing it privately works or does it have to go public before you see any results?

**Penny** - I would say with Managed Care today that Physicians are feeling competition to stay on panels and really do pay attention to reports like this.

**Luis** - Gave a demonstration on the Internet Office of Health Data Website and what things it can do ([www.healthdata.state.ut.us](http://www.healthdata.state.ut.us)). A new system in development is The Emergency Dept. Internet Query System ([www.nahdo.org/nahdo/ediq/index.htm](http://www.nahdo.org/nahdo/ediq/index.htm)).

**Lori** - Could we put a glossary in there to help people that don't understand all of the different terms used.

**Luis** - There will be a glossary and even help menus when we are finished with it.

**Bob** - When Scott Williams and I got together and decided who are the users of our data, we decided employers were a logical place to look. Health Insight has a group called the Business Health Partnership which they are working with, trying to help them get the best insurance value. Cardio vascular care is also being studied because of their input. This should be something that is ongoing thing.

**Penny** - I think consumers should get some of the information we are getting and get the information that they are studying in their groups and work more closely together.

**Orrin** - We deliberately held off holding the retreat until we were reconstituted and had a full committee. 1) Is the retreat still a good idea? 2) When do we want to have it? 3) What is the planning process?

1. Responses from Committee members in a hand out.
2. We should include Scott Williams or maybe Rod Betit.
3. Select a facilitator to keep us on task during the retreat.

**Penny** - maybe we could have those interested in planing the retreat, have a conference call and I would be glad to be participate of that.

**Orrin** - when do we want to do this retreat? If we don't do it soon, then it will be summer and then school is out, and fall is just too far away.

**Penny** - The 1st part of July is the best. How about the 6th or 7th of July. Full day. Or 12th of July. Call everyone who isn't here and get honed in on a date, because our calendars fill up.

**Orrin** - Who do you recommend for a facilitator? If anyone has a suggestion, get back with me. Patrick Johnson is a good person to check out. He has the background and would be good. He was the Director of the Governor's Health Policy Commission and now is with Health Insight.

Adjourned at 5:07